

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10706062 FILING DATE
APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
1							51						
2							52						
3							53						
4							54						
5							55						
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41							91						
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43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND	2						TOTAL IND						
TOTAL DEP.	21						TOTAL DEP.						
TOTAL CLAIMS	23						TOTAL CLAIMS						